## FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

## FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

1387077
OMB APPROVAL

OMB Number: Expires: Estimated average hours per response.

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160 UNIFORM LIMITED OFFERING EXEMPTION	
Name of Offering ( check if this is an amendment and name has changed, and indicate change.)	
Legacy Partners Reafty Fund II, Inc Series A Preferred Stock	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) ULOE	
Type of Filing:	
A. BASIC IDENTIFICATION DATA	
Enter the information requested about the issuer	07041470
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)	
Legacy Partners Realty Fund II, Inc.	
Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone	e Number (Including Area Code)
4000 East Third Avenue, Suite 600, Foster City, CA 94404 650-571-22	200
Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephor (if different from Executive Offices)	ne Number (Including Area Code)
Brief Description of Business	1
A corporation investing, through an affiliated limited liability company, in a diversified portfolio of office, rindustrial properties and land located primarily in California and the Denver and Seattle areas.	research and development, and
Type of Business Organization	
corporation   limited partnership, already formed   other (please specify business trust   limited partnership, to be formed	PROCESSED
Month Year  Actual or Estimated Date of Incorporation or Organization: 03 06 Actual Estimated  Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:	JAN 2 2 2007
CN for Canada; FN for other foreign jurisdiction)	THOMSON
GENERAL INSTRUCTIONS	FINANCIAL

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

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Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

		A-BASICID	ENTIFICATION DATA	The second second	的學學學學學學學
2. Enter the information re	quested for the foll	lowing:	•		
<ul> <li>Each promoter of t</li> </ul>	he issuer, if the iss	uer has been organized w	vithin the past five years;		
<ul> <li>Each beneficial ow</li> </ul>	ner having the powe	er to vote or dispose, or di	rect the vote or disposition	of, 10% or more of	a class of equity securities of the issuer.
<ul> <li>Each executive off</li> </ul>	icer and director of	corporate issuers and of	corporate general and mar	naging partners of	partnership issuers; and
Each general and r	nanaging partner of	f partnership issuers.			
			FD F 055	Discount of	Canada and/or
2. Enter the information requested for the following:  Each promoter of the issuer, if the issuer has been organized within the past five years;  Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer.  Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer.  Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer.  Each general and managing partner of partnership issuers; and  Each general and managing partner of partnership issuers.  Check Rox(es) that Apply:					
Legacy Partners Comme	ercial LLC				
			ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner		☑ Director	
Full Name (Last name first,	f individual)				
Barry DiRaimondo					
			ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	السا
•	f individual)			-	
Business or Residence Addre	ess (Number and	Street, City, State, Zip C	ode)		
4000 East Third Avenue,	Suite 600, Foste	er City, CA 94404			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	
Full Name (Last name first,	if individual)			·	
HHMI Real Estate, Inc.			•		
	•		ode)		
Check Box(es) that Apply:	Promoter	■ Beneficial Owner	Executive Officer	Director	<b>-</b>
	•	ia			
Business or Residence Address 1111 Broadway, Suite 14			ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☑ Director	General and/or Managing Partner
Full Name (Last name first, Rick Wada	if individual)				
Business or Residence Addre 4000 East Third Avenue			ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Addre	ess (Number and	Street, City, State, Zip C	ode)		
	(Use blan	nk sheet, or copy and use	additional copies of this s	heet, as necessary	)

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1. Has the	issuer solo	l or does th	he issuer in	itend to se	ll, tô non-ac	credited in	nvestors in	this offeri	ne?	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Yes Fi	No <b>⊠</b>
1. 1145 1110	100001 0010	., 01 4000 1									_	
2. What is											s_1,0	00.00
3. Does th	e offering	nermit ioint	t ownershi	n of a sino	le unit?						Yes 🔣	No
											_	التنا
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.												
Full Name ( H&L Equition		first, if indi	ividual)									
Business or		Address (N	lumber and	l Street, Ci	ity, State, Z	ip Code)						
1175 Peach					•	-	30361					
Name of As	sociated Br	oker or De	aler									
States in Wi	nich Person	Listed Has	s Solicited	or Intends	to Solicit I	urchasers				· · · · · · · · · · · · · · · · · · ·		
(Check	"All States	" or check	individual	States)			***************************************				☐ Al	l States
AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	(A)	HI	ID
IL	IN	[A]	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
MT) (RI)	NE SC	NV SD	NH TN	NJ TX	NM UT	NY VT	IXC VA	ND WA	OH WV	QK WI	OR WY	PA PR
					<u>.</u>							
Full Name (	Last name	first, if ind	ividual)									
Business or	Residence	: Address (1	Number an	d Street, C	ity, State, 2	Lip Code)						
Name of As	sociated Bi	roker or De	aler				·	<u>.</u>				<del></del>
States in W	hich Persor	Listed Ha	s Solicited	or Intends	to Solicit I	urchasers	-,,					
(Check	"All State:	s" or check	individual	States)		*************			******		□ \( \bullet \)	1 States
AL	AK	AZ	AR	CA	ĊŎ	CT	DE	DC	FL	GA	HI	ID
II.	[IN]	[A]	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
MT RI	NE SC	(NV) (SD)	NH (TN)	NJ TX	NM UT	NY VT	NC VA	ND WA	OH WV	OK WI	OR WY	PA PR
					(4.1							
Full Name (	Last name	iirsi, ii ina	ividuai)									
Business of	r Residence	Address (	Number an	d Street, C	City, State, 2	Zip Code)				-		
Name of As	sociated B	roker or De	aler							<u> </u>		
States in W	hich Persor	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers	<del></del>				<u>.,,</u>	
(Check	"All State:	s" or check	individual	States)	•••••	***************************************					☐ Al	1 States
AL	ĀK	AZ	ĀR	CA	CO	CT	DE	DC	FL	GA	HI	[ID]
IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
MT RI	NE SC	NV SD	NH TN	NJ TX	NM UT	NY] VT	NC)	ND WA	OH WV	OK WI	OR WY	PA PR

## G-OFFERING PRICE; NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	, ,		
	Type of Security	Aggregate Offering Price	ė	Amount Already Sold
	Debt	\$		\$
	Equity	§ 125,000.00		<u>\$ 125,000.00</u>
	Common Preferred			
	Convertible Securities (including warrants)	\$		\$
	Partnership Interests :	\$		\$
	Other (Specify)			
	Total	\$ 125,000.00	_	\$_125,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.			
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors		Aggregate Dollar Amount of Purchases § 125,000.00
	Accredited Investors		_	· -
	Non-accredited Investors	0		\$_0.00
	Total (for filings under Rule 504 only)		_	\$
	Answer also in Appendix, Column 4, if filing under ULOE.			
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.			
	T COCC. in .	Type of Security		Dollar Amount Sold
	Type of Offering  Rule 505	•		\$
	Regulation A			
	Rule 504			\$ \$
	Total		-	\$ 0.00
			_	<u> </u>
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			
	Transfer Agent's Fees	•••••		\$
	Printing and Engraving Costs	**************		<b>\$</b>
	Legal Fees		Z	\$_20,000.00
	Accounting Fees			\$
	Engineering Fees			\$
	Sales Commissions (specify finders' fees separately)		$\overline{Z}$	\$ <u>6,250.00</u>
	Other Expenses (identify)		<b>✓</b>	\$_35,000.00
	Total		7	s 61,250.00

	A CONTRINGUES OF THE STATE OF T	BEROFINVESTORS EXPENSES AND USE OF	PROCEEDS ASSESSED	Better State Control
	b. Enter the difference between the aggregate offeri and total expenses furnished in response to Part C — of proceeds to the issuer."	ng price given in response to Part C — Question 1 Question 4.a. This difference is the "adjusted gross	5	\$
i.	Indicate below the amount of the adjusted gross pro each of the purposes shown. If the amount for an check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Part	y purpose is not known, furnish an estimate and the payments listed must equal the adjusted gros	i	
	•		Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees		<u></u> \$	\$
	Purchase of real estate		\$	\$
	Purchase, rental or leasing and installation of macand equipment	hinery	<u></u> \$	_ 🗆 \$
	Construction or leasing of plant buildings and faci	ilities	s	. 🗆 \$
	Acquisition of other businesses (including the value offering that may be used in exchange for the asset issuer pursuant to a merger)	ts or securities of another	□\$	<b>□</b> \$
	Repayment of indebtedness			
	Working capital			
	Other (specify):			
			□\$	
	Column Totals			
	Total Payments Listed (column totals added)		<b>∑</b> \$ <u>6</u>	3,750.00
<b>3</b> (	energy of the second se	DFEDERALSIGNATURE		
Γh:	e issuer has duly caused this notice to be signed by the nature constitutes an undertaking by the issuer to fur information furnished by the issuer to any non-acci	undersigned duly authorized person. If this notion is to the U.S. Securities and Exchange Comm	e is filed under Russion, upon writte	ile 505, the followin
SS	uer (Print or Type)	Signature	Date	
Le	gacy Partners Realty Fund II, Inc.			
۱a	me of Signer (Print or Type)	Title of Signer (Print or Type)		
lic	k Wada	Vice President and Secretary		

- ATTENTION ----

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

E STATE SIGNATURE	MARK T	
1. Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes [	No <b>☑</b>

See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

dary aumorized person.	// c1	
Issuer (Print or Type)	Signature Date /	
Legacy Partners Realty Fund II, Inc.	Signature Wad 01/12/07	
Name (Print or Type)	Title (Print or Type)	
Rick Wada	Vice President and Secretary	

## Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Type of security Intend to sell and aggregate to non-accredited investors in State offered in state amount purchased in State	5 Disqualification under State ULOE (if yes, attach explanation of waiver granted)
(Part B-Item 1) (Part C-Item 1) (Part C-Item 2)	(Part E-Item 1)
Number of Accredited Non-Accredited Investors Amount Investors Amount	Yes No
AL AL	
AK AK	
AZ AZ	
AR AR	
CA	
СО	
СТ	
DE	
DC DC	
FL Preferred Stock 11 \$11,000.00 0	X
GA Preferred Stock 92 \$92,000.00 0	X
HI	
ID	
IL I	
IN STATE OF THE ST	
IA	
KS	
KY	
LA	
ME	
MD Preferred Stock 2 \$2,000.00 0	
MA	
MI STATE OF THE ST	
MN	
MS	

APPENDIX											
1		to coll	Type of security			4		5 Disqual under Sta (if yes,	te ULOE.		
		to sell ccredited	and aggregate offering price		Type of investor and			explana			
	investor	s in State	offered in state	amount purchased in State (Part C-Item 2)				waiver	granted)		
	(Part B	-Item 1)	(Part C-Item 1)		(Part			(Part E-	Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No		
МО											
МТ											
NE											
NV					ļ		·				
NH											
NJ								<u>                                     </u>	<u>i</u>		
NM				1							
NY											
NC		×	Preferred Stock	2	\$2,000.00	0			×		
ND		<u> </u>						<u> </u>			
ОН								<u> </u>	<u>                                     </u>		
ок		×	Preferred Stock	4	\$4,000.00	0			×		
OR											
PA		<u>×</u>	Preferred Stock \$2,000,00	2	\$2,000.00	0			X		
RI											
SC											
SD								1			
TN									<u> </u>		
TX		×	Preferred Stock	9	\$9,000.00	0			×		
UT											
VT											
VA		×	Preferred Stock	3	\$3,000.00	0.		<u> </u>	×		
WA									<u>                                     </u>		
WV											
wı											

1	Intend to sell to non-accredited investors in State (Part B-Item 1)		3	Type of investor and amount purchased in State (Part C-Item 2)				5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
			Type of security and aggregate offering price offered in state (Part C-Item 1)						
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
WY									
PR									